SCGA
SOUTHERN CALIFORNIA GOLF ASSOCIATION

**CLUB NUMBER:** ______________________

# TOURNAMENT POSTING

**CLUB NAME:** ______________________________________________

**SIGNATURE/TITLE:** ______________________________________________ **DATE:** ______________

| Date Played (mm/dd/yy) | Membership Number | Last Name *(PLEASE PRINT CLEARLY)* | First Initial | ESC Score | Course Rating | Slope Rating | Name of Course Played |
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